

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214509614				
1.) CORPORATION NAME: DUE DATE: 4/30/2014 ALSTOM Grid Inc.						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER, 16TH FLOOR 1111 EAST MAIN STREET RICHMOND, VA		SCC ID NO: F1546615 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	500
CLASS	AUTHORIZED					
COMMON	500					
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY						
4.) STATE OR COUNTRY OF INCORPORATION: OH						
6.) PRINCIPAL OFFICE ADDRESS: <div style="text-align: center;"> ADDRESS: 200 GREAT POND DR. CITY/ST/ZIP: WINDSOR, CT 06095 </div>						
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
NAME: MICHAEL ATKINSON TITLE: PRESIDENT ADDRESS: 10867 WILLOWS ROAD NE CITY/ST/ZIP/CO: REDMOND, WA 98052	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: Amy Ericson TITLE: VICE PRESIDENT ADDRESS: 200 GREAT POND DR. CITY/ST/ZIP/CO: WINDSOR, CT 06095	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: MICHAEL SALERNO TITLE: VICE PRESIDENT ADDRESS: 1409 CENTERPOINT BLVD CITY/ST/ZIP/CO: KNOXVILLE, TN 37932	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: JOSEPH SCE TITLE: VP, TAX ADDRESS: 200 GREAT POND DR CITY/ST/ZIP/CO: WINDSOR, CT 06095	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR					
NAME: WILLIAM F SCHOELWER TITLE: VICE PRESIDENT ADDRESS: 801 PENNSYLVANIA AVE NW CITY/ST/ZIP/CO: STE 855 WASHINGTON, DC 20004	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR					
NAME: JAMES G RANKIN TITLE: ASST TREASURER ADDRESS: 200 GREAT POND DR CITY/ST/ZIP/CO: WINDSOR, CT 06095	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR					

NAME:	DAVID H SIMPSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	200 GREAT POND DR		
CITY/ST/ZIP/CO:	WINDSOR, CT 06095		
NAME:	MICHAEL J TOLPA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	200 GREAT POND DR		
CITY/ST/ZIP/CO:	WINDSOR, CT 06095		
NAME:	SOPHIE CHALLET	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	801 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	STE 855 WASHINGTON, DC 20004		
NAME:	Tracy Archer	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	801 PENNSYLVANIA AVENUE		
CITY/ST/ZIP/CO:	STE 855 WASHINGTON, DC 20004		
NAME:	Ingrid Lehnert	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2 International Plaza		
CITY/ST/ZIP/CO:	STE 855 Philadelphia, PA 19114		
NAME:	Sophie Challet	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	801 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		
NAME:	RICHARD D AUSTIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	801 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	STE 855 WASHINGTON, DC 20004		
NAME:	PATRICK PLAS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3 AVENUE ANDRE		
CITY/ST/ZIP/CO:	, , FN		
NAME:	Jeffrey Baron	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	130 Third St., NW		
CITY/ST/ZIP/CO:	Canton, OH 44702		
NAME:	Bill Jones	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	130 Third St., NW		
CITY/ST/ZIP/CO:	Canton, OH 44702		

NAME:	Katherine Markeson	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10867 Willows Rd.		
CITY/ST/ZIP/CO:	Redmond,, WA 98052		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ MICHAEL J TOLPA	MICHAEL J TOLPA, TREASURER	2/23/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			